

PASSAIC VALLEY SEWERAGE COMMISSION
APPLICATION FOR A SEWER USE PERMIT

INDUSTRIAL 120-503
8115 8120 8125 8205
MAR 08 2004

SECTION A

1. Company Name: Signmasters, Inc.
2. Permit Number if applicable: 26220028
3. Location: 217 Brook Avenue
Passaic Park, NJ Zip Code: 07055
4. Mailing Address: Same
Zip Code: _____
5. Person to contact concerning information provided in this application:
Name of Contact Official: Mr. Robert Palmaffy
Title: Manager of Operations Phone No.: (973) 614-8300
Address: Same Zip code: _____
6. Number of Employees – Full Time: 55 Part Time: 0
Number of Work Days Per Year: 260
Number of Shifts Per Day: One
7. If property is owned indicate block and lot number(s): NA

Assessed Value: NA
8. If property is rented indicate name and address of owner: _____

- Total square feet rented: 60,000
9. List NJPDES Permit Number if applicable, NA and
Name of receiving Body of Water entered NA

SECTION B**WATER DATA**

10. Water Source: (Circle all appropriate answers)

Purchased Y - NWell Y - N

If Y, is it metered Y - N

River Y - N

If Y, is it metered Y - N

11. Name of purchased water supplier: =Passaic Valley Water Co.List all Account #'s: NA12. Water Received: From Mo. Jan Yr. 2003 Through Mo. Dec Yr. 2003.

(* Next to a figure means it is estimated).

	<u>PURCHASED</u>	<u>WELL</u>	<u>RIVER</u>	<u>TOTAL</u>
1 st Qtr.	54,956			54,956
2 nd Qtr.	54,486			54,486
3 rd Qtr.	64,681			64,681
4 th Qtr.	48,899			48,899

GRAND TOTAL 223,022 gallons/year

Report in gallons

13. Water Use and Disposition (*Next to a figure means it is estimated).

	Gallons Sanitary/Combined Sewer	Discharged Stormwater/River/ Ditch	Gallons Used Other
Sanitary service only	191,080		
Process waste water	31,942		
Cooling water	0		
Evaporation			
Contained in the product			
Other (describe)			

GRAND TOTAL 223,022

4	
10	
	54,956.+
	54,486.+
	64,681.+
	48,899.+
004	
	223,022.*

	191,080.+
	31,942.+
002	
	223,022.*

SECTION B (continued)

14. Process wastewater which is discharged as above is metered as follows:

To the Separate Sanitary Sewer	<u>-Y-</u>
To the Combined Sewer	Y - N
To the Storm Sewer	Y - N
River or Ditch	Y - N

15. Waste hauler information: List all firms and/or independent contractors used to remove process waste or sludge from this facility.

Contractor	Address	Icc #	Waste type handled
Safety-Kleen	50 Snake Hill Road West Nyack, NY 10994	NA	Off set fountain sol.

SECTION C**OPERATIONAL CHARACTERISTICS**

16. Discharge of Industrial Waste is continuous No
or intermittent two to five times each operating day.

If the discharge is intermittent, it occurs between the following hours: 7:00 to 5:00p.m.

17. Brief description of Manufacturing or other activity performed: _____

Silk screen washing only

List SIC CODE #: _____

18. Principal Raw Materials used: Detergents, bleaches and mild acids

19. Principal Products or Services: Screen printing and off-set printing

20. Describe seasonal variations, if significant, giving dates, volumes, rates, hours, etc.
Include variations in product lines which affect waste characteristics: None

Does this facility shutdown for vacation(s)? No If so, is it basically the same time each year. _____ Provide dates usually shutdown _____

SECTION D

MONITORING

21. Describe any pretreatment process or effluent monitoring system in use:

Outlet No. 1 pH adjustment- muriatic acid to lower pH
and soda ash to raise pH

Outlet _____ carbon treatment- two, 55-gallon carbon drums
installed in series (second carbon used as

Outlet _____ backup to prevent break-thru) to remove
total petroleum hydrocabons to concentrations

22. Sampling information: below 100ppm

<u>Outlet</u>	<u>Contains Industrial Waste</u>	<u>Sampler Type</u>	<u>Refrigerated</u>
<u>No. 1</u>	<u>pH adjustment</u>	<u>PH meter</u>	<u>NA</u>
	<u>t. petroleum hyd</u>	<u>lab glassware</u>	
		<u>with sulfuric acid as preservative</u>	<u>Yes</u>

SECTION D (continued)

23. Volume Information:

<u>Outlet</u>	<u>Daily Flow</u> <u>(Gallons)</u>	<u>Metered</u> <u>(Y - N)</u>	<u>Type</u>	<u>Date</u>
No. 1	123gal./day*	Y	Wastewater	1/03 to 12/03

24. Frequency of calibration of each flow meter: daily

25. Attach plot plan of the property showing:

- (a) all existing or proposed sewer and drain lines (including outlets to a storm sewer, river or ditch);
- (b) sample point(s); Monitoring or Pretreatment Equipment; Incoming meter(s); Well meter(s); Internal meter (s); Flowmeter(s).
- (c) details of the connection(s) to the municipal (or PVSC) sewer, including the distance and direction of each connection from the nearest street intersection.

SECTION E**ANALYSIS OF INDUSTRIAL WASTE**

26. Analysis for Industrial Waste must be a proper sample taken for each outlet.

OUTLET NO. No. 1

Report to the nearest unit: XX. Except where indicated with (1) Example: 15 mg/l all values in milligrams/liter			Report to the nearest hundredth: 0.XX Except where indicated Example: 0.36 mg/l		
Code	Parameter	Value	Code	Parameter	Value
0200*	Radioactivity (PL-1)		1097*	Antimony (Sb)	
0500	Total Solids	650	1002*	Arsenic (As)	
0505	Volatile Solids	157.0	1022*	Boron (B)	
0530	Total Suspended Solids	46	1027	Cadmium (Cd)	<0.001
0540	Volatile Suspended Solids	41.0	1034*	Chromium Total (Cr)	
0555	(1)(3) Petroleum Hydrocarbons	2.54	1042	Copper (Cu)	<0.008
0310	Biochemical Oxygen Demand (BOD)	118	1045*	Iron (Fe)	
0340	Chemical Oxygen Demand (COD)	380	1051	Lead (Pb)	<0.002
0680	Total Organic Carbon (TOC)	79.40	0720*(3)	Cyanide (Cn)	
			1900	Mercury (Report to 0.XXX)	<0.0005
			1067	Nickel (Ni)	0.0093
			1147*	Selenium (Se)	
9000	pH(standard unit range)	9.53	1077*	Silver (Ag)	
0610	(1) Ammonia as N	5.170	1102*	Tin (Sn)	
0550	(1)(3) Total Oil & Grease	< 5.0	1092	Zinc (Zn)	0.0456
0745*	(1) Sulfide		2730	Phenol	<0.050
0507*	(1) Ortho Phosphates as P		4053*	Pesticides (Report to 0.XXX)	
0625*	(1) Kjeldahl N as N				
9998*	(2)(3) TTO (Report to 0.XXX)		9999*(3)	TTVO (Report to 0.XXX)	

FOOTNOTES:

- (1) Report results to the nearest tenth, i.e., 1.6 mg/l.
- (*) Analyze for this if reasonably expected to be present in the discharge unless otherwise exempted.
- (2) See instructions.
- (3) Grab sample required

Rev: 1/87
8/89
7/90
9/94
8/95
11/95
07/98

SECTION E (continued)

Samples collected by: HESA Environmental Corporation

23 Jefferson Plaza, Princeton, NJ 08540 Date: 1/26/04

Sample analyzed by: Integrated Analytical Laboratories (IAL) Date: 2/2/04

Products being manufactured when sample was collected: Silk screen printing

27. Who performs the analyses of the samples for User Charge? IAL

28. Is the Laboratory certified by NJDEP to conduct all the analyses? Y - N YES

29. Who performs the analyses of the samples for the Pretreatment Parameters?

pH adjustment by Signmasters personnel

If monitoring has not commenced for Pretreatment, indicate Laboratory you plan to use. If unknown, so state:

IAL

30. Is the Laboratory certified by NJDEP to conduct all the required Pretreatment analyses?

Y - N Yes

31. Based upon knowledge of materials and processes used at this facility check the appropriate box that best describes the potential that a Priority Pollutant, listed on Tables 1,2 & 3 is present in your discharge.

SECTION F**PRETREATMENT**

32. Industrial Category: SIC 3993
Subpart (s): _____
33. Compliance date(s): _____
34. Is facility in compliance? Yes If not, and if compliance date has passed, explain actions being taken to get into compliance: _____

35. Date Baseline Monitoring Report (BMR) submitted to PVSC: 2/04
36. Compliance schedule submitted: No
If yes is facility on schedule? _____ Explain if compliance date will not be met: _____

37. Does this facility come under the Resource Conservation and Recovery Act (RCRA)?
If yes, describe Large quantity generator
38. Does this facility have a Spill Prevention Control and Countermeasures (SPCC) plan?
If yes, describe Yes
39. Has NJDEP or EPA ever cited this facility for a violation of State or Federal Regulations for the nature of its wastewater discharge? Y - N No
40. Is this facility under an ISRA Clean up? No If so, has a plan been approved by NJDEP: _____
- Is there any plan to discharge groundwater?
None

CERTIFICATION*:

The information contained in this application is familiar to me and, to the best of my knowledge and belief, such information is true, complete and accurate.

If the applicant is a corporation, a corporate resolution is attached granting me the authority to sign the application on behalf of the corporation.

Name of signing official:

Mr. Robert Palmaffy

Print Name

TITLE:

Manager of Operations

March 4, 2004

DATE

Robert Palmaffy
SIGNATURE

*APPLICATION MUST BE SIGNED BY ONE OF THE FOLLOWING:

- a. Principal Officer of Corporation
- b. President or Owner of Company -
- c. General Partner if a Partnership
- d. Plant Manager or Authorized Representative

TABLE 1 EPA PRIORITY POLLUTANTS**CHECK APPROPRIATE BOX**

NAME	A	B	C	D		A	B	C	D
Acenaphthene			X		2,4 dimethylphenol			X	
acrolein					2,4 dinitrotoluene				
acrylonitrile					2,6 dinitrotoluene				
benzene					1,2 diphenylhydrazine				
benzidine					ethylbenzene				
carbon tetrachloride (tetrachloromethane)					fluoranthene				
chlorobenzene					4-chlorophenyl phenyl ether				
1,2,4-trichlorobenzene					4-bromophenyl phenyl ether				
hexachlorobenzene					bis(2-chloroisopropyl) ether				
1,2 dichloroethane					bis(2-chloroethoxy) methane				
1,1,1 trichloroethane					methylene				
hexachloroethane					chloride(dichloromethane)				
1,1,dichloroethane					methyl chloride				
1,1,2 trichloroethane					(chloromethane)				
1,1,2,2 tetrachloroethane					methyl bromide				
chloroethane					(bromomethane)				
bis(chloromethyl) ether					bromoform(tribromomethane)				
Bis(2 chloroethyl) ether					dichlorobromomethane				
2-chloroethyl vinyl ether mixed					trichlorofluoromethane				
2-chloronaphthalene					dichlorodifluoromethane				
2,4,6, trichlorophenol					chlorodibromomethane				
parachlorometa cresol					hexachlorobutadiene				
Chloroform (trichloromethane)					hexachlorocyclopentadiene				
2 chlorophenol					isophorone				
1,2, dichlorobenzene					naphthalene				
1,3, dichlorobenzene					nitrobenzene				
1,4, dichlorobenzene					2-nitrophenol				
3,3, dichlorobenzidine					4-nitrophenol				
1,1,dichloroethylene					2,4-dinitrophenol				
1,2 trans-dichloroethylene					4,6 dinitro-o cresol				
2,4,dichlorophenol					N-nitrosodimethylamine				
1,2, dichloropropane					N-nitrosodiphenylamine				
1,3, dichloropropylene					N-nitrosodi-n-propylamine				
(1,3 dichlor propene)					pentachlorophenol				
					phenol				

- A. KNOWN TO BE PRESENT
 B. SUSPECTED TO BE PRESENT
 C. KNOWN TO BE ABSENT
 D. SUSPECT TO BE ABSENT

TABLE 1 EPA PRIORITY POLLUTANTS (continued)**CHECK APPROPRIATE BOX**

NAME	A	B	C	D		A	B	C	D
bis(2-ethylhexyl) phthalate		X			endrin			X	
butylbenzylphthalate					endrin aldehyde				
di-n-butylphthalate					heptachlor				
di-n-octylphthalate					heptachlor (epoxide)				
diethylphthalate					BHC Alpha				
dimethylphthalate					BHC Beta				
benzo(a)anthracene					BHC Gamma				
benzo(a)pyrene					BHC Delta				
3,4 benzo fluoranthene					PCB1242				
benzo(k) fluoranthene					PCB1254				
chrysene					PCB1221				
acenaphthylene					PCB1232				
anthracene					PCB1248				
benzo(ghi)perylene					PCB1260				
fluorene					PCB1016				
phenanthrene					toxaphene				
dibenzo (a,h) anthracene					antimony (total)				
indeno (1,2,3-c,d) pyrene					arsenic (total)				
pyrene					asbestos (fibrous)				
tetrachloroethylene					beryllium (total)			▼	
toluene					cadmium (total) <i>NON-USE CERT.</i>				X
trichloroethylene					chromium (total)				X
vinyl chloride					copper (total)	X			
aldrin					cyanide (total)				X
dieldrin					lead (total)	X			
chlordan					mercury (total) <i>NON-USE CERT.</i>				X
4,4 DDT					nickel (total)	X			
4,4, DDE					selenium (total)				X
4,4, DDD					silver (total)				X
endosulfan I					thallium (total)				X
endosulfan II					zinc (total)	X			
endosulfan sulfate					2,3,7,8, tetrachlorodibenzo				X
		▼			p-dioxin				X

- A. KNOWN TO BE PRESENT
 B. SUSPECTED TO BE PRESENT
 C. KNOWN TO BE ABSENT
 D. SUSPECT TO BE ABSENT

TABLE 2 NJDEP EXPANDED PRIORITY POLLUTANTS**CHECK APPROPRIATE BOX**

NAME	A	B	C	D		A	B	C	D
acrylamide			X		n,n-dimethyl aniline			X	
amitrole					3,3-dimethyl benzidine				
amyl alcohols					1,1-dimethylhydrazine				
aniline hydrochloride					dioxane				
anisole					diphynylamine				
auramine					ethylenimine				
benzotrichloride					hydrazine				
benzylamine					4,4-methylene bis				
					(2-chloraniline)				
o-chloroaniline					4,4-methylenedianiline				
m-chloroaniline					methyl isobutyl ketone				
p-chloraniline					alpha-naphthylamine				
1-chloro-2-nitrobenzene					beta-naphthylamine				
1-chloro-4-nitrobenzene					n-methylaniline				
chloroprene					1,2- phenylenediamine				
chrysoidine					1,3- phenylenediamine				
cumene					1,4-phenylenediamine				
2,3-dichloroaniline					sudan 1 (solvent yellow 14)				
2,4-dichloroaniline					thiourea				
2,5-dichloroaniline					toluene sulfonic acids				
3,4-dichloroaniline					toluidines				
3,5-dichloroaniline					xylidines				
1,3-dichloropropene									
1,3-dimethoxybenzidine									

- A. KNOWN TO BE PRESENT
 B. SUSPECTED TO BE PRESENT
 C. KNOWN TO BE ABSENT
 D. SUSPECT TO BE ABSENT

TABLE 3 EPA HAZARDOUS SUBSTANCES**CHECK APPROPRIATE BOX**

NAME	A	B	C	D		A	B	C	D
acetaldehyde			X		isopropanolamine			X	
allyl alcohol					kelthane				
allyl chloride					kepene				
amyl acetate					malathion				
aniline					mercaptodimethur				
benzonitrile					methoxychlor				
benzyl chloride					methyl mercaptan				
butyl acetate					methyl methacrylate				
butylamine					methly parathion				
captan					mevinphos				
carbaryl					mexacarbate				
carbofuran					monoethylamine				
carbon disulfide					monomethylamine				
chlorpyrifos					naled				
coumaphos					napthenic acid				
cresol					nitrotoluene				
crotonaldehyde					parathion				
cyclohexane					phenolsulfanate				
2,4-D (2,4-dichlorophenoxy)					phosgene				
acetic acid					propagrite				
diazinon					propylene oxide				
dicamba					pyrethrins				
dichlobenil					quinoline				
dichlone					resorcinol				
2,2-dichloropropionic acid					strontium				
dichlorvos					strychnine				
diethylamine					stryrene				
dimethylamine					2,4,5-T (2,4,5-trichloro- phenoxy acetic acid)				
dinitrobenzene					TDE (tetrachloro- diphenylethane)				
diquat					2,4,5-TP 2(2,4,5- trichlorophenoxy				
disulfoton					trichlorofon				
diuron					triethylamine				
epichlorohydrin					trimethylamine				
			↓		propanoic acid			↓	

- A. KNOWN TO BE PRESENT
 B. SUSPECTED TO BE PRESENT
 C. KNOWN TO BE ABSENT
 D. SUSPECT TO BE ABSENT

TABLE 3 EPA HAZARDOUS SUBSTANCES (continued)**CHECK APPROPRIATE BOX**

<u>NAME</u>	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>		<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>
ethanolamine			X		uranium			X	
ethion			↓		vanadium			↓	
ethylene diamine			↓		vinyl acetate			↓	
ethylene dibromide			↓		xylene			↓	
formaldehyde			↓		xlenol			↓	
furfural			↓		zirconium			↓	
guthion			↓						
isoprene			↓						

- A. KNOWN TO BE PRESENT
 B. SUSPECTED TO BE PRESENT
 C. KNOWN TO BE ABSENT
 D. SUSPECT TO BE ABSENT

SUPPLEMENTAL SEWER USE APPLICATION QUESTIONNAIRE

The following questionnaire must be completed and submitted by all industrial and tax-exempt users making application for a SEWER USE PERMIT. The purpose of this questionnaire is to identify the correct name and address of the applicant and all individuals and entities owning 10% or more of the applicant. This will assist the PVSC by providing necessary information for service of notices, bills and other documents upon the applicant, for service of process as well as the individual to be contacted in the event of an emergency.

BY SIGNING THIS APPLICATION THE APPLICANT IS ACKNOWLEDGING ITS CONTINUING OBLIGATION TO UPDATE THE INFORMATION CONTAINED IN THIS QUESTIONNAIRE. SPECIFICALLY THE APPLICANT UNDERSTANDS THAT IT SHALL NOTIFY THE PVSC WITHIN THIRTY (30) DAYS OF ITS ENTERING INTO A CONTRACT OR AGREEMENT TO TRANSFER ITS CAPITAL STOCK AND/OR 50% OR MORE OF ITS ASSETS. THE APPLICANT SHALL LIKEWISE INFORM THE PVSC, ON A CONTINUING BASIS, OF ALL INDIVIDUALS OR ENTITIES OWNING 10% OR MORE OF THE CAPITAL STOCK OR ASSETS OF THE CORPORATION AND ANY INDIVIDUAL OR ENTITY ENTITLED TO RECEIVE MORE THAN 10% OF THE NET PROFITS OF THE APPLICANT.

FAILURE TO NOTIFY THE PVSC OF ANY CHANGES IN THE CORPORATE STRUCTURE, OWNERSHIP OR PLANNED TRANSFER OF OWNERSHIP WITHIN 15 DAYS OF ITS OCCURRENCE SHALL BE DEEMED A VIOLATION OF THE SEWER USE PERMIT, THE RULES AND REGULATIONS OF THE PVSC AND N.J.S.A. 58:14-1 et. seq.

SECTION ONE

(To be completed by all applicants)

NAME OF APPLICANT: State the complete name of the organization applying for a SEWER USE PERMIT ("Permit"), as it appears on the certificate of incorporation, charter, by-laws, partnership agreement, trust or other official document which establishes the name of the applicant (if no such document exists, state the name the business uses):

Signmasters, Inc.
Name of Applicant

TRADE NAME: Identify all trade names, names under which the applicant will be doing or soliciting business and/or fictitious names that the organization will utilize at the location(s) for which this Permit application is made.

Aim Graphics & Signing Services, Inc.
Trade Name/Fictitious Name

BUSINESS ORGANIZATION: Please check the appropriate box:

- | | |
|---|--|
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Trust |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Joint Venture |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Non-Profit Corporation |
| <input checked="" type="checkbox"/> Corporation | <input type="checkbox"/> Limited Liability Company |
| <input type="checkbox"/> Other (describe) | |

EMERGENCY CONTACT PERSON: In the event of an emergency, provide the name, address and telephone number of the person(s) the PVSC can contact:

Name: Mr. Robert Palmaffy

Street Address:

City, State & Zip Code:

Business Telephone: 973-614-8300 Emergency Telephone:

PAST NAMES OF APPLICANT. List all names under which the applicant has done business or held itself out to the public as doing business in the past. Include names of division, and "trading as," "doing business as," fictitious, or informal name.

<u>Name</u>	<u>From (Year)</u>	<u>To (Year)</u>
NA		

APPLICANT'S FORMER FACILITIES IN NEW JERSEY. List all locations, including office, in the State of New Jersey at which the applicant formerly operated any aspect of its business, and any location at which such a business was owned or operated by any predecessor of the applicant, or by any owner, partner, director, officer, key employee or stockholder holding 10% or more of the applicant's equity.

<u>Address</u>	<u>Type of Facility</u>	<u>From To (years)</u>	<u>NJDEP regis. No. and or USEPA I.D.</u>
1500 Hudson Street, Hoboken	Same	1984 - 1990	NJD 002159697

APPLICANT'S FACILITIES IN OTHER JURISDICTIONS. List all locations in any state, including offices, districts or territory of the United States other than New Jersey, or in any foreign country, at which the applicant is currently operating any aspect of its business.

<u>Address</u>	<u>Telephone</u>	<u>Type of facility</u>	<u>USEPA I.D. and/or any permits (nos. and name of issuing agency)</u>
NA			

SECTION TWO

(To be completed only by Corporations and Limited Liability Companies)

REGISTERED AGENT: Identify the name and address of the Corporation's Registered Agent:

Name: Mr. John Fernandez

Company Name: Signmasters, Inc.

Street Address: 380 Kenwood Street

City, State & Zip Code: Englewood, NJ 07063

Telephone: 201-871-7807

(Area Code)

DATE AND PLACE OF INCORPORATION/FORMATION: Identify the state where the corporation/LLC was organized and the date on which the Certificate of Incorporation/Formation was filed:

State/Country: New Jersey

Date: United States of America

Certificate of Incorporation No.: 22-2211178

Copy of certificate of incorporation attached? y Yes No

DATE AUTHORIZED IN NEW JERSEY: If other than a New Jersey corporation/LLC, state the date on which the corporation/LLC received a Certificate of Authority to Transact Business in New Jersey (and attach copy).

Date:

OFFICERS. List the following information as to each Officer of the corporation. Use additional copies of this section as necessary.

Name: Howard Muser Telephone: 973-994-4975

Business address: 217 Brook Avenue, Passaic Park, NJ 07055

Office held	Date took office	Date of birth
<u>Partner</u>	<u>April 6, 1989</u>	<u>April 13, 1946</u>

Name: John Fernandez Telephone: 201-871-7807
(area code)

Business address: 217 Brook Avenue, Passaic Park, NJ 07055

Office held	Date took office	Date of birth
<u>Partner</u>	<u>April 6, 1989</u>	<u>Dec. 23, 1940</u>

DIRECTORS. List the following information as to each Director of the corporation. Use additional copies of this section as necessary.

Not Applicable

Name: _____ Telephone: _____
(area code)

Business address: _____

Office held	Date took office	Date of birth
_____	_____	_____

FORMER OFFICERS AND DIRECTORS: List the following information as to each person who was an Officer or Director of the corporation at any time during the last 10 years and is not listed in the responses above. Use additional copies of this section, as necessary.

Name and last known address:

Not Applicable

Position held	From	To (month/year)	Date of birth
_____	_____	_____	_____

SECTION THREE

(To be completed only by Corporations and Limited Liability Companies)

List all persons and/or entities holding a 10% or greater ownership, equity, beneficial or other interest in the Applicant along with the addresses and telephone #. Use additional copies of this section as necessary.

Name: Not- Applicable

Street Address:

City, State & Zip Code:

Bus.Phone

Name:

Street Address:

City, State & Zip Code:

Bus.Phone

If any of the persons and/or entities listed above is a corporation or Limited Liability Corporation, for each such corporation provide all information requested in Section Two of this Questionnaire.

SECTION FOUR

(To be completed only by Partnerships or Joint Ventures)

Provide a copy of the partnership or joint venture agreement of applicant.

Copy attached? Yes No

TYPE OF ASSOCIATION:

Check One

☒ General Partnership☐ Limited Partnership☐ Joint Venture**GENERAL PARTNERS OR JOINT VENTURERS.**

List the following information as to each partner or joint venturer. Use additional copies of this section, as necessary. If a limited partnership, list limited partners separately under the heading "limited partners."

Name: Howard Muser

Street Address: 31 Stonewall Drive

City, State & Zip Code: Livingston, NJ 07039

Telephone: 973-994-4975

Name: John Fernandez

Street Address: 380 Kenwood Street

City, State & Zip Code: Englewood, NJ 07631

Telephone: 201-871-7807

LIMITED PARTNERS.
this section as necessary.

List the following information as to each limited. Use additional copies of

Name: NA

Street Address:

City, State & Zip Code:

Telephone:

Name: NA

Street Address:

City, State & Zip Code:

Telephone:

FORMER PARTNERS/JOINT VENTURERS. List the following information as to all prior partners (general and limited) and joint venturers of the applicant during the past 10 years that are not listed above. Use additional copies of this section as necessary.

Name: NA

Street Address:

City, State & Zip Code:

Telephone:

Dates during which individual was a partner: _____

Name:

Street Address:

City, State & Zip Code:

Telephone: _____ Telephone _____

Dates during which individual was a partner: _____

If any of the persons and/or entities listed above is a corporation or Limited Liability Corporation, for each such corporation provide all information requested in Section Two of this Questionnaire.

SECTION FIVE

(This section to be completed only if the business concern is organized in a form other than a sole proprietorship, corporation, partnership or joint venture—such as a trust or association)

FORM OF BUSINESS ORGANIZATION: Describe how the business entity is organized and under what legal authority it was established.

Type (trust, trade association; estate; etc.)

Copy attached? _____ Yes _____ No

OWNERS, OFFICERS, TRUSTEES, CONTROLLING PARTIES, ETC. List the following information as to each person who owns, controls or is an officer or trustee of the Applicant. If any owner, officer, trustee, or controlling party listed below shall be a corporation, limited liability corporation, or partnership (general or limited liability), the Applicant shall supply the information requested in Sections Two, Three and Four as applicable. Use additional copies of this section as necessary.

Name: Howard Muser

Street Address: 31 Stonewall Drive

City, State & Zip Code: Livingston, NJ 07039 Telephone: 973-994-4975

Name: John Fernandez

Street Address: 380 Kenwood Street

City, State & Zip Code: Englewood, NJ 07631 Telephone: 201-871-7807

SECTION SIX

CIVIL VIOLATIONS HISTORY

(To be completed by all applicants)

The following questions concern civil violations of environmental protection laws and regulations. In this section, the term "you" refers to the applicant identified in SECTION I, and to any of the following:

- a. Any predecessor firm, or any previous name under which the applicant operated.
- b. Subsidiaries: Any business in which the applicant holds 25% of equity or debt liability.
- c. Sister companies: Any business in which the applicant's parent company holds more than 10% of the equity or debt liability.
- d. Any corporation of which the Applicant is a subsidiary.
- e. Any Officer, Director, Partner, or Joint Venturer of the applicant, and any business concern owned or controlled by any such individual.

Provide a response in each section. Each item pertains to all of the entities and individuals listed above. If an answer is None or the item is not applicable, write "None" or "N/A". A question left unanswered will not be presumed "Not applicable" or "None" - THE FORM WILL BE DEEMED INCOMPLETE.

As used below, the term "law or regulation pertaining to protection of the environment" includes laws and regulations relating to the discharge, treatment, storage, processing, recycling or disposal of industrial waste or hazardous waste and any others relating to water and air pollution, discharge of hazardous substances and treatment of hazardous materials. It includes regulations of the Passaic Valley Sewerage Commissioners ("PVSC"), N.J. DEP, the U.S. EPA, the N.J. DOT, and the U.S. Department of Transportation.

- A. **NEW JERSEY VIOLATIONS NOTICES.** List and explain all Summonses, Notices of Violation, Notices of Prosecution, Administrative Orders and Actions, civil complaints, settlements, Judicial or Administrative Consent Orders, or Notices of Intent to Deny or Revoke any license or permit, or similar notices, issued to you within the past 10 years by the PVSC, New Jersey Department of Environmental Protection (DEP) or United States Environmental Protection Agency. **Attach additional sheets if necessary.**

Name of
entity cited: Signmasters, Inc.

Date
Issued: July 21, 2003

Address of
alleged violation: 217 Brook Avenue, Passaic Park, NJ 07055

Alleged violation: N.J.A.C.7:26G-9.1(a) &
N.J.A.C.7:26G-6.1(a)

Type of
notice: Civil Administrative

Disposition & explanation: Violations abated. Fines of \$2,000 and \$1,000 paid

Name of issuing agency: NJDEP

Docket No.: EA ID-PEA030002

- B. **FEDERAL VIOLATION NOTICES.** List and explain all Notices of Violation, Notices of Prosecution, Administrative Orders and Actions, civil complaints, or similar notices issued to you within the past 10 years by the U.S. Environmental Protection Agency or U.S. Department of Transportation for any alleged violation of any federal law or regulation pertaining to protection of the environment. Use additional copies of this section as necessary.

Name of
entity cited: Signmasters, Inc.

Date
Issued: October 21, 2002

Address of
alleged violation: 217 Brook Avenue, Passaic Park, NJ 07055

Alleged violation: 40CFR&262.34, 265.31, 265.173
265.16, 265.54, 279.22

Type of
notice: Solid Waste Disposal

Disposition &
explanation: Installation of a new chemical storage area, checklist
for insuring drum closure, labeling program
and development of a RCRA Conting

Name of issuing agency: U.S.E.P.A.

Docket no.: 02-0000-3008-036

C. NEW JERSEY MUNICIPALITIES AND COUNTIES. List and explain all Notices of Violation, Notices of Prosecution, Administrative Orders and Actions, Summonses, civil Complaints, Citations of any kind, and Notices of intent to Deny or Revoke a license or permit, or any similar notices issued to you within the past 10 years by any municipality or county in the State of New Jersey, for any alleged violation of any law or regulation pertaining to the protection of the environment, other than a motor vehicle or littering offense. Use additional copies of this section as necessary.

Name of
entity cited: NA

Date
Issued: _____

Address of
alleged violation: _____

Alleged violation: _____

Type of
notice: _____

Disposition &
explanation: _____

Name of issuing agency: _____

Docket no.: _____

D. OTHER STATES AND FOREIGN COUNTRIES. List and explain all Notices of Violation, Notices of Prosecution, Administrative Orders and Actions, Summons, Civil Complaints, Citations of any kind, and Notices of Intent to Deny or Revoke a license or permit, or any similar notices issued to you within the past 10 years by any state other than the State of New Jersey or by any foreign country, for any alleged violation of any law or regulation pertaining to the protection of the environment, other than a motor vehicle or littering offense. Use additional copies of this section as necessary.

Name of
entity cited: NA

Date
Issued: _____

Address of
alleged violation: _____

Alleged violation: _____

Type of
notice: _____

Disposition &
explanation: _____

Name of issuing agency: _____

Docket no.: _____

SECTION SEVEN**OTHER CIVIL COURT JUDGMENTS AND PENDING LITIGATION**

(To be completed by all applicants)

A. OTHER JUDGMENTS. List and explain all judgments of liability in excess of \$25,000 rendered against the applicant in the past 10 years, starting with the most recent. **Use additional copies of this section as necessary.**

Title of case: NA

Docket No.: _____

Name & location
of court: _____Date judgment
entered: _____Nature of
suit: _____Amt./terms of
judgment: _____

B. PENDING SUITS. List and explain all civil suits in which the applicant is presently involved as a party plaintiff or defendant. Include matters involving resolution before arbitration boards. **Use additional copies of this section as necessary.**

Title of case: _____

Docket No.: _____

Name & location
of court: _____

Date Filed: _____

Nature of
suit: _____

Status: _____

SECTION EIGHT**CRIMINAL CHARGES AND CONVICTIONS**

(To be completed by all applicants)

List all indictments, accusations, summonses, complaints, and information against the applicant for any crime, felony, misdemeanor, disorderly persons offense, petty disorderly persons offense or criminal violation.

NOTE: You need not list convictions for any violation of Title 39 of the Revised Statutes (N.J.S.A.) or comparable motor vehicle offenses in jurisdictions other than New Jersey. Death by Auto or Vehicular Homicide is considered a criminal offense and must be listed under this item.

List convictions first. Use additional copies of this page as necessary.

Name of entity
charged/convicted: NA

Description of
crime/offense charged: _____

Date
Charged: _____

Jurisdiction
Where Charged: _____

Indictment information,
Complaint No., indictment No. etc., _____

Disposition (if applicable,
sentence imposed): _____

CERTIFICATION

(All applicants must sign and date the following certification)

I hereby certify the answers supplied in the foregoing SUPPLEMENTAL SEWER USE PERMIT APPLICATION QUESTIONNAIRE are true. I am aware that if any of the foregoing responses are willfully false, I am subject to punishment.

Dated:

Signature

Robert Palmoffey

Print Title & Position

GENERAL MANAGER

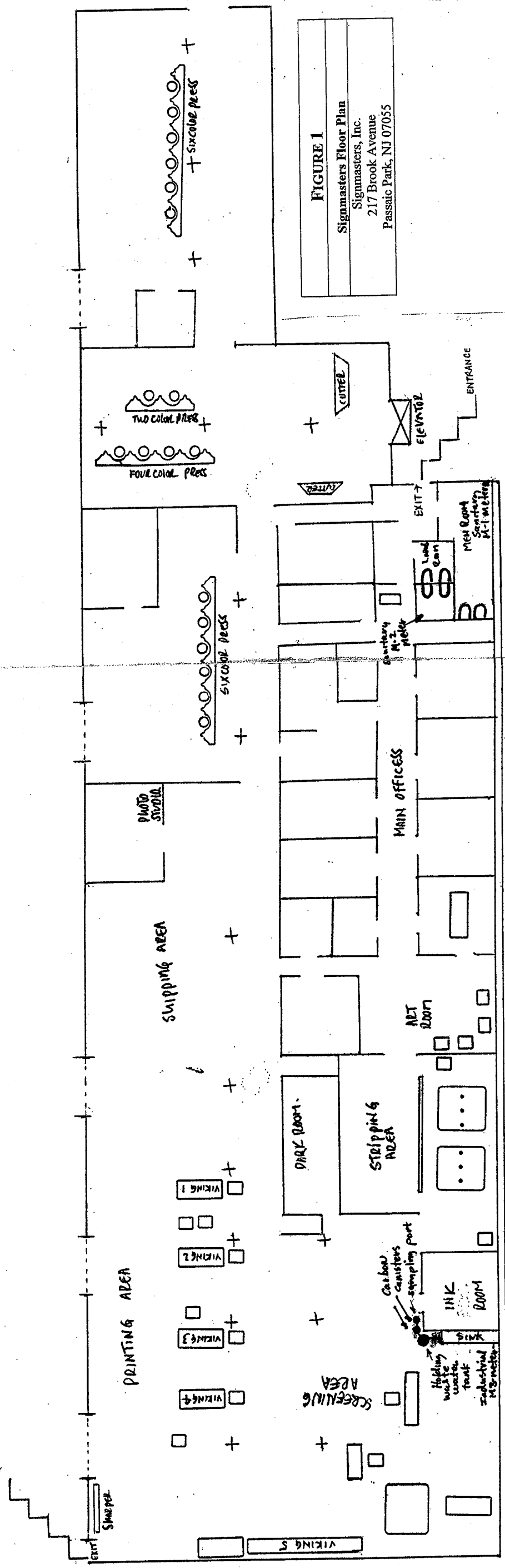


FIGURE 1
Sigmamasters Floor Plan
Sigmamasters, Inc.
217 Brook Avenue
Passaic Park, NJ 07055



ANALYTICAL DATA REPORT

for

Hesa Environmental Corp.
23 Jefferson Plaza
Princeton, NJ 08540

Project Name: SIGNMASTERS - 113-6

Lab Case Number: E04-00746

MDL = METHOD DETECTION LIMIT

Metals

Lab ID: 00746-001

Client ID: WS-55

Matrix-Units: Aqueous-µg/L

Percent Moisture: 100

Date Sampled: 1/26/04

Time Sampled: 14:30

Date Analyzed: 2/2/04

Parameter	Result	Q	MDL
Cadmium	ND		1.00
Copper	ND		8.00
Lead	ND		2.00
Mercury	ND		0.500
Nickel	9.30		4.00
Zinc	45.6		8.00

General Analytical

Lab ID: 00746-001

Client ID: WS-55

Percent Moisture: 100

Date Sampled: 1/26/04

Time Sampled: 14:30

Parameter	Result	MDL	Matrix-Units	Date Analyzed
Biochemical Oxygen Demand	118000	2000	Aqueous-µg/L	1/28/04 10:00
Chemical Oxygen Demand	380000	50000	Aqueous-µg/L	1/27/04 9:50
Ammonia	5170	200	Aqueous-µg/L	1/27/04 11:25
pH/Corrosivity	9.53	NA	Aqueous-SU	1/27/04 10:30
Total Recoverable Phenols	ND	50.0	Aqueous-µg/L	1/29/04 9:46
Total Organic Carbons	79400	5000	Aqueous-µg/L	2/2/04 9:43
Total Solids	650000	10000	Aqueous-µg/L	2/9/04 15:50
Total Volatile Solids	157000	10000	Aqueous-µg/L	2/9/04 15:50
Total Suspended Solids	46000	10000	Aqueous-µg/L	1/30/04 17:00
Volatile Suspended Solids	41000	10000	Aqueous-µg/L	2/2/04 17:30
Oil & Grease	ND	5000	Aqueous-µg/L	2/2/04 14:00
Total Petroleum Hydrocarbons	2540	500	Aqueous-µg/L	1/27/04 16:20

ND = Analyzed for but Not Detected at the MDL

These data have been reviewed and accepted by:

Michael H. Leftin
Michael H. Leftin, Ph.D.
Laboratory Director

273 Franklin Road
Randolph, NJ 07869
Phone: 973 361 4252
Fax: 973 989 5288



IAL is a NELAC New Jersey Certified Lab (14751) and maintains certification in Connecticut (PH-0699), New York (11402), Rhode Island (00126), Florida (E87670) and in the Department of Navy IR QA Program.

REPORTING & BILLING

Company	HESA
Fax to:	
Fax #:	
E-Mail to:	
Report to:	
Address:	
Telephone #:	732-329-6363
Fax #:	6454
Project Name:	SIGNMASTERS
Project Manager:	J. Johannidis
Reference ID#:	113-6
PO#:	

SAMPLE INFORMATION

SAMPLE MATRIX	
W - Waste	SL - Sludge A - Aqueous
O - Oil	X - Other S - Soil
GW - Groundwater	SOL - Solid

[illegible]

... cannot be processed and fill out completely. Samples cannot be processed until any ambiguities have been resolved.

CUSTODY LOG

Signature/Company	Date	Time	Signature/Company
Relinquished by: <i>[Signature]</i>	<i>as above</i>		Received by: <i>[Signature]</i>
Relinquished by: <i>[Signature]</i>	<i>1-21-10</i>		Received by: <i>[Signature]</i>
Relinquished by:			Received by:
Relinquished by:			Received by:
Relinquished by:			Received by:

100 COPIES - WHITE & YELLOW; CLIENT COPY - PINK

Conditional / TPHC				Results needed by:	Report Format
24 hr*	48 hr	72 hr	1 wk	NA	Results Only
<u>Verbal/Fax</u>					Reduced
24 hr*	48 hr*	72 hr*	1 wk*	2 wk/Std	Regulatory
<u>Hard Copy</u>					SRP Disk**; dbf or wk1
72 hr*	1 wk*	2 wk*	3 wk/Std		Special Requirements:

*Prior to sample arrival, Lab notification is required. RUSH Surcharge will apply

Lab notification is required. RUSH Surchage will apply

ANALYTICAL PARAMETERS / PRESERVATIVES

***** Circle format required**

[illegible]

MDL Req:

GWOS or SCC

Comments:

Lab Case #

Describe	PAGE:
----------	-------

REV 10/03

PROJECT INFORMATION

Case No. **E04-00746** Project **SIGNMASTERS - 113-6**Customer **Hesa Environmental Corp.**P.O. # **NA**Contact **Jay Johnnidis**Received **1/26/2004 16:10**

EMail

☐ EMail EDDsVerbal Due **2/12/2004**Phone **(732) 329-6363**Fax **1(732) 329-6454**Report Due **2/17/2004**Report ToBill To

23 Jefferson Plaza

23 Jefferson Plaza

Princeton, NJ 08540

Princeton, NJ 08540

Attn: Jay Johnnidis

Attn: Jay Johnnidis

Report Format **Standard**Additional Info ☐ State Form☐ Field Sampling☐ Conditional VOA

Lab ID	Client Sample ID	Depth Top / Bottom	Sampling Time	Matrix	Unit	# of Containers
00746-001	WS-55	n/a	1/26/2004@14:30	Aqueous	µg/L	10

Sample #	Tests	Status	QA Method
001	Cadmium - Cd	Complete	200.8
"	Copper - Cu	Complete	200.8
"	Lead - Pb	Complete	200.8
"	Mercury - Hg	Complete	245.1
"	Nickel - Ni	Complete	200.8
"	Zinc - Zn	Complete	200.8
"	Ammonia	Complete	350.1
"	BOD	Complete	405.1
"	COD	Complete	HACH 8000
"	Oil Grease	Complete	413.1
"	pH/Corrosivity	Complete	150.1
"	TOC	Complete	415.1
"	Total Recoverable Phenols	Complete	420.2
"	Total Solids	Complete	160.3
"	TPHC-48 HR TAT	Complete	418.1
"	TSS (Suspended)	Complete	160.2
"	TVS (Volatile)	Run	2540G
"	VSS (Suspended)	Complete	2540G

01/27/2004 09:34 by Ellen - NOTE 1

OTHER ANALYSES (EXCEPT BOD) DEPENDENT ON TPHC.

01/29/2004 10:24 by Mark - REV 1

REV 01 DUE 2/9/04

AS PER JAY J., ACTIVATE ALL METALS & WET CHEM ANALYSES ON HOLD, DUE 2/9/04.

PROJECT INFORMATION



Case No. **E04-00746**

Project **SIGNMASTERS - 113-6**

02/09/2004 16:47 by Mark - REV 2

REV 02 DUE 2/12/04
ORIG FAX SENT 2/9/04

PER JAY JOHNIDIS, ANALYZE SAMPLE FOR TOTAL VOLATILE SOLIDS, DUE TO CLIENT WITH HC PACKAGE ON
2/17/04. CLIENT IS AWARE HOLDING TIME IS EXPIRED

INTEGRATED ANALYTICAL LABORATORIES, LLC

SAMPLE RECEIPT VERIFICATION

CASE NO E04

00746

CLIENT:

NR1A

COOLER TEMPERATURE: 2° - 6°C: ☒ (See Chain of Custody)

CHAIN OF CUSTODY: COMPLETE / INCOMPLETE Comments:

Sample Bottles Intact:

☒

Comments:

Sample Labels Intact/ Correct:

☒

Sufficient Sample Volume:

☒

Correct bottles/ preservative:

☒

Samples received in

holding time/ prep time:

☒

Headspace/ bubbles in voa samples:

☒

Samples to be subcontracted:

Preserved Sample pH checked:
(Excluding voa samples)☒

KEY

☒ = YES☒ = NO☒ = N/A

ADDITIONAL COMMENTS:

SAMPLE(S) VERIFIED BY:

INITIAL

JR

DATE

1/26/04

CORRECTIVE ACTION REQUIRED:

YES

(SEE BELOW)

NO

CLIENT NOTIFIED:

YES

Date/ Time: 1.27.04 9:30

NO

PROJECT CONTACT:

Jay Johnidis

SUBCONTRACTED LAB:

DATE SHIPPED:

ADDITIONAL COMMENTS:

As per Jay Johnidis, run BOD +
TPH only - all others contingent on TPH results.
(METALS = SAME AS E04-00297)

VERIFIED/TAKEN BY:

INITIAL

BNC

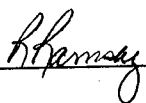
DATE

LABORATORY CUSTODY CHRONICLE

Case No. **E04-00746**Client Hesa Environmental Corp.Project SIGNMASTERS - 113-6

			Preparation		Analysis	
			Date / Time	Analyst	Date / Time	Analyst
Department: Metals						
Cadmium - Cd	00746-001	Aqueous	2/2/04	Lisa	2/2/04	Helge
Copper - Cu	00746-001	Aqueous	2/2/04	Lisa	2/2/04	Helge
Lead - Pb	00746-001	Aqueous	2/2/04	Lisa	2/2/04	Helge
Mercury - Hg	00746-001	Aqueous	2/2/04	Lisa	2/3/04	Helge
Nickel - Ni	00746-001	Aqueous	2/2/04	Lisa	2/2/04	Helge
Zinc - Zn	00746-001	Aqueous	2/2/04	Lisa	2/2/04	Helge
Department: Wet Chemistry						
Ammonia	00746-001	Aqueous	n/a	n/a	1/27/04	Jackie
BOD	00746-001	Aqueous	n/a	n/a	1/28/04 @ 10:00	Natalie
COD	00746-001	Aqueous	n/a	n/a	1/27/04	Natalie
Oil Grease	00746-001	Aqueous	n/a	n/a	2/2/04	Hala
pH/Corrosivity	00746-001	Aqueous	n/a	n/a	1/27/04 @ 10:30	Elma
TOC	00746-001	Aqueous	n/a	n/a	2/2/04	Elma
Total Recoverable Phenols	00746-001	Aqueous	n/a	n/a	1/29/04	Debbie
Total Solids	00746-001	Aqueous	n/a	n/a	2/9/04	Kam
TPHC-48 HR TAT	00746-001	Aqueous	n/a	n/a	1/27/04	Hala
TSS (Suspended)	00746-001	Aqueous	n/a	n/a	1/30/04	Kam
TVS (Volatile)	00746-001	Aqueous	n/a	n/a	2/9/04	Kam
VSS (Suspended)	00746-001	Aqueous	n/a	n/a	2/2/04	Kam

Review and Approval: _____



DONALD TUCKER
CHAIRMAN

CARL S. CZAPLICKI, JR.
VICE CHAIRMAN

ANTHONY W. ARDIS
FRANK J. CALANDRIELLO
ALAN C. LEVINE
ANGELINA M. PASERCHIA
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THOMAS J. POWELL
COMMISSIONERS



Passaic Valley
Sewerage Commissioners

100th Anniversary
1902 - 2002

600 WILSON AVENUE
NEWARK, NJ 07105
(973) 344-1800
Fax: (973) 344-2951
www.pvsc.com

ROBERT J. DAVENPORT
EXECUTIVE DIRECTOR

JAMES KRONE
DEPUTY EXECUTIVE DIRECTOR

JOSEPH A. FERRIERO
CHIEF COUNSEL

LOUIS LANZILLO
CLERK

Industrial Fax: (973-344-4876)

RECEIPT

RECEIVED FROM Sign Masters Inc.

AMOUNT OF PAYMENT 750.00 DATE OF PAYMENT 3/8/04

A/ MR-1 , MR-2 REPORT DUE ON _____ (LATE REPORT)

B/ SV FINE, CONSENT ORDER (EFFLUENT VIOLATION)

C/ SEWER USE APPLICATION FEE	\$ 750.00
GROUNDWATER APPLICATION FEE	\$ 750.00
LETTER OF AUTHORIZATION	\$ 200.00
PERMIT FEE PER YEAR	\$ 300.00
PERMIT FEE PER YEAR	\$ 600.00
OTHER	\$ _____

PAYMENT RECEIVED BY:

SIGNATURE Vanessa Muniz

AMOUNT 750.00

DATE 3/9/04

PASSAIC VALLEY SEWERAGE COMMISSION
APPLICATION FOR A SEWER USE PERMIT

INDUSTRIAL 120-503
8115 8120 8125 8205
MAR 08 2004

SECTION A

- Company Name: Signmasters, Inc.
- Permit Number if applicable: 26220028
- Location: 217 Brook Avenue
Passaic Park, NJ Zip Code: 07055
- Mailing Address: Same
Zip Code: _____
- Person to contact concerning information provided in this application:
Name of Contact Official: Mr. Robert Palmaffy
Title: Manager of Operations Phone No.: (973) 614-8300
Address: Same Zip code: _____
- Number of Employees – Full Time: 55 Part Time: 0
Number of Work Days Per Year: 260
Number of Shifts Per Day: One
- If property is owned indicate block and lot number(s): NA
Assessed Value: NA
- If property is rented indicate name and address of owner: _____

SIGNMASTERS, INC.
217 BROOK AVE.
PASSAIC PK., NJ 07055
973-614-8300

EXPLANATION	AMOUNT
<i>Gr. Permit</i>	<i>750.00</i>
<i>750.00</i>	<i>750.00</i>

55-150/212

15892

AMOUNT		DOLLARS				CHECK AMOUNT
DATE	TO THE ORDER OF	ACCTS. PAYABLE	DISC.	OTHER	CHECK NUMBER	
10/4	PVSC Sewerage System				15892	750.00

HUDSON UNITED BANK
60-68 14TH STREET
HOBOKEN, NJ 07030

THIS DOCUMENT CONTAINS HEAT SENSITIVE INK. TOUCH OR PRESS HERE - RED IMAGE DISAPPEARS WITH HEAT.

⑈015892⑈ ⑈021201503⑈003 0208436025⑈

**HESA Environmental Corporation**

23A Jefferson Plaza / Princeton, NJ 08540

MARCH 4
~~October 2~~, 2004

Ms. Angela Dees
Manager of Industrial Pollution Control
Passaic Valley Sewerage Commissioners
600 Wilson Avenue
Newark, NJ 07105
(via fax: 973-344-2951)

INDUSTRIAL	126-503				
8110	8115	8120	8125	8205	
MAR 08 2004					

SUBJECT: REQUEST FOR EXTENSION FOR SEWER USE PERMIT #26220028
SIGNMASTERS INC.
217 BROOK AVENUE, PASSAIC PARK, NJ
PERMIT #: 26408201

Dear Ms. Dees:

As discussed with you yesterday, HESA requests a one week extension to submit the permit application. The completed application will be forwarded to your office by March 10, 2004.

If you have any questions, please do not hesitate to contact our office.

Very truly yours,

J Johnnidis, Principal
For the Firm
(113-9permext)

cc: Mr. Robert Palmaffy, Signmasters, Inc.

Phone: (732) 329-6363

**Hazard Evaluation, Substance Assessment &
Environmental Services**

Fax (732) 329-6454

Please visit our website at www.hesaenviro.com